

FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4						
5			cancel			
6						
7			cancel			
8						
9						
10						
11						
12						
13	1		1			
14						
15						
16						
17			cancel			
18						
19						
20						
21			1			
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49						
50						
TOTAL IND.	2					
TOTAL DEP.	18					
TOTAL CLAIMS	20					

	* 1st Amends *		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.	3					
TOTAL DEP.	47					
TOTAL CLAIMS	50					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

Best Available Copy